QUERY CONTROL FORM Application No. 10 05/ Prepared by Tracking Number Examiner-GAU \angle Date Week Date 500 No. of queries **JACKET** a. Serial No. f. Foreign Priority k.)Print Claim(s) p./PTO-1449 b. Applicant(s) g. Disclaimer I. Print Fig. q. PTOL-85b c. Continuing Data h. Microfiche Appendix m. Searched Column r. Abstract d. PCT i. Title n. PTO-270/328 s. Sheets/Figs e. Domestic Priority j. Claims Allowed o. PTO-892 t. Other SPECIFICATION -**MESSAGE** a. Page Missing b. Text Continuity c. Holes through Data DEPENDENCY d. Other Missing Text e. Illegible Text f. Duplicate Text g. Brief Description h. Sequence Listing Correct i. Appendix j. Amendments k. Other **CLAIMS** a. Claim(s) Missing b.) Improper Dependency c. Duplicate Numbers Same order d. Incorrect Numbering initials e. Index Disagrees **RESPONSE** f. Punctuation g. Amendments h. Bracketing i. Missing Text j. Duplicate Text k. Other

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